## Application of nocket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective Qctober 1, 2000

09/936430

| TOTAL CLAIMS  FOR  NUMBER FILED  NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS  minus 20=  "INDEPENDENT CLAIMS  minus 3 = "  NULTIPLE DEPENDENT CLAIM PRESENT  "If the difference in column 1 is less than zero, enter "O" in column 2  "If the difference in column 1 is less than zero, enter "O" in column 2  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  CLAIMS AS AMENDED - PART II  (Column 3)  REMAINING PREVIOUSLY PAID FOR PRESENT PAEVOUSLY PAID FOR PRESENT PRESENT PRESENT PRESENT PRESENT PRESENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  TOTAL  (Column 1)  (Column 1)  (Column 2)  (Column 3)  REMAINING NUMBER PRESENT PRES  | (Column 1) (Column 2                           |                   |                     |               |                    |                |              | SMALL ENTITY TYPE |             |           | OTHER THAN R SMALL ENTITY |                |
|---|--|-------------------|---------------------|---------------|--------------------|----------------|--------------|-------------------|-------------|-----------|---------------------------|----------------|
| FOR NUMBER FILED NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS minus 20=  | TOTAL CLAIMS                                   |                   |                     |               |                    |                | RA           | TE                | FEE         | 7         |                           |                |
| TOTAL CHARGEABLE CLAIMS   minus 20=   X\$ 9=   OR   X\$18=    INDEPENDENT CLAIMS   3 minus 3 =   X40=   OR   X\$0=    MULTIPLE DEPENDENT CLAIM PRESENT  | FOR  |                   |                     | NUMBER        | FILED NUM          | BER EXTRA      | BASI         | FEE               |             | OR        | BASIC FEE                 | -              |
| INDEPENDENT CLAIMS  MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "O" in column 2  If the difference in column 1 is less than zero, enter "O" in column 2  CLAIMS AS AMENDED - PART II  (Column 1)  CLAIMS AS AMENDED - PART II  (Column 2)  CLAIMS AS AMENDED - PART II  (Column 2)  CLAIMS AS AMENDED - PART II  (Column 3)  NUMBER PREVIOUSLY PRESENT EXTRA PREVIOUSLY PRESENT EXTRA  PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  CLAIMS REMAINING NUMBER PRESENT NUMBER PRESENT NUMBER PREVIOUSLY PRESENT TOTAL OR ADDIT. FEE  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 8)  (Column 9)  (Column 1)  (Column 2)  (Column 3)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 2)  (Column 3)  (Colum  | TOTAL CHARGEABLE CLAIMS                        |                   |                     | 6 minus 20= * |                    |                | X\$          | 9=                |             |           | X\$18=                    | 000            |
| *If the difference in column 1 is less than zero, enter "0" in column 2  *If the difference in column 1 is less than zero, enter "0" in column 2  *CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  **CLAIMS REMAINING AFTER PREVIOUSLY PRESENT PREVIOUSLY PRODUCKY PRODUC  | INI  | DEPENDENT C       | LAIMS               | 3 minus 3 =   |                    |                | X4           | 0=                | -           | -         | 200                       | <del>- /</del> |
| *If the difference in column 1 is less than zero, enter "0" in column 2  **CLAIMS AS AMENDED - PART II  (Column 1)  CAIMS REMAINING REMAINING AFTER AMENDMENT  Total  **Description of Multiple Dependent Claim  **OR TOTAL  OR TOTAL  ON TOTAL  NUMBER PREVIOUSLY PAID FOR  TOTAL  FEE  ON X\$18=  ON TOTAL  ON TOTAL  ON TOTAL  FEE  TOTAL  ON SMALL ENTITY  ON SMALL ENTITY | M  | JLTIPLE DEPE      | NDENT CLAIM P       | RESENT        |                    |                |              |                   | <del></del> | 104       |                           | -/-            |
| CLAIMS AS AMENDED - PART II  (Column 1)  CCAIMS REMAINING AFTER AMENDMENT  Total  Independent  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CCAIMS REMAINING AFTER AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CCAIMS REMAINING AFTER AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CCAIMS REMAINING AFTER AMENDMENT  RATE  TOTAL  OR ADDIT. FEE  TOTAL  OR ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL  OR ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL  OR ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL  OR ADDIT. FEE  OR TOTAL  OR ADDIT. FEE  TOTAL  OR ADDIT. FEE  OR TOTAL  OR ADDIT. FEE  TOTAL  OR ADDIT. FEE  OR OR ADIT. FEE  OR ADDIT. FEE    | • (1   | the difference    | column 2            | L             |                    |                | ┩▔▔          |                   |             |           |                           |                |
| Column 1)   Column 2)   Column 3)   Colu    |  |                   |                     |               |                    |                |              | AL                |             | JOR       | •                         | 860            |
| REMAINING AFTER PREVIOUSLY PRESENT EXTRA PAID FOR  Total  Total  Minus    | 1  | 1/23/05           |                     |               |                    |                | SMALL ENTITY |                   |             | OR        |                           |                |
| Column 1   Column 2   Column 3  | Y.   |                   | REMAINING           |               | NUMBER             | PRESENT        | 4 -          |                   |             | :         |                           |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                   |                     |               | PAID FOR           | EXTRA          |              |                   |             |           | HAIE                      |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  | 2  | Total             | • 6                 | Minus         | 20                 | • —            | X\$          | 9=                | ٠           | OR        | X\$18=                    |                |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING NUMBER PREVIOUSLY PAID FOR TOTAL AMENDMENT PAID FOR Independent • Minus ••• = X\$9= OR X\$18=  Independent • Minus ••• = X40= OR X80=  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 2) (Column 3)   | AME  |                   | · 3                 |               |                    |                | X40          | ď.                |             | OR        | X80=                      |                |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PAID FOR TOTAL ADDIT. FEE  Total • Minus ••• =   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                   |                     |               |                    |                | +13          | 5=                |             |           | +270=                     | . •            |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PAID FOR TOTAL ADDITIONAL FEE  Independent • Minus ••• = X40= OR X80=  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1) (Column 2) (Column 3)  |  |                   |                     | •             |                    |                | TC           | TAL               |             | 100       | TOTAL                     |                |
| REMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PAID FOR TOTAL INCHEMENT OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1) (Column 2) (Column 3)  |  |                   | (Column 1)          | •             | (Column 2)         | (Column 3)     | ADDIT.       | FEE I             |             | 10        | ADDIT. FEE                | <u> </u>       |
| AFTER AMENDMENT PAID FOR EXTRA  Total Minus Minu  | 8  |                   | CLAIMS              |               |                    |                |              | - 1               |             |           |                           | ADDI-          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +135=  TOTAL ADDIT. FEE  (Column 1)  (Column 2)  (Column 3)   | ENT  |                   |                     |               |                    |                | RAT          | E                 |             |           | RATE                      |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +135=  TOTAL ADDIT. FEE  (Column 1)  (Column 2)  (Column 3)   | NON  | Total :           | •                   | Minus         | ••                 | =              | X\$ 9        | )=                |             | OR        | X\$18=                    | ·              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +135= OR +270= TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE  (Column 1) (Column 2) (Column 3)   | AME  |                   | •                   |               |                    | =              | X40          | _                 |             | ام        | X80=                      | ·              |
| TOTAL ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE (Column 1) (Column 2) (Column 3)   |  | FIRST PRESE       | NTATION OF MU       | ILTIPLE DEF   | PENDENT CLAIM      |                | 130          | _                 |             |           | .070                      |                |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)   | ,  | . •               |                     | •             |                    |                |              | 1                 |             | L         | i                         | · ·            |
|   | ر<br>ان تيمال                                  | e<br>Barrioria    |                     | ٠.            |                    |                |              |                   |             | OR ,      |                           |                |
| REMAINING AFTER PREVIOUSLY EXTRA RATE TIONAL FEE  Total • Minus • Total X\$ 9= X\$18=   | <u></u>  |                   | CLAIMS              |               | HIGHEST            |                |              |                   |             |           |                           |                |
| AMENDMENT PAID FOR FEE  Total   | Ž  |                   | AFTER               |               | PREVIOUSLY         | PRESENT        | RATI         |                   |             | .         | RATE                      |                |
| Independent Minus   |  | Total (           |                     | Minus         |                    |                | <u> </u>     | $\dashv$          | 7.5         | ··· }     | · · ·                     |                |
|   |  | Independent       | •                   | Minus         | ***                |                | X\$.9        | 4                 | 44.         | OR        | X\$18=                    |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ( ) X40= OR X80=   | ₹  | FIRST PRESE       | NTATION OF MU       | LTIPLE DEP    | ENDENT CLAIM       |                | X40-         | 4                 |             | OR        | X80=                      |                |
| +135= OR +270=  |  |                   |                     |               |                    |                | +135         |                   |             | OR        | +270=                     |                |
| "If the entry in column 1 is less than the entry in column 2, write "I in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE  | 11   | the "Highest Nurr | iber Previously Pai | d For IN THIS | SPACE Is loca than | 20 actor 220 = |              |                   |             | L<br>Or a |                           |                |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   | T  |                   |                     |               |                    |                |              |                   |             |           |                           |                |